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Atty Docket No. 023070-122010US

PTO FAX NO.: 1-703-872-9306

ATTENTION: Examiner Teena Kay Mitchell
TELEPHONE NO.:

Group Art Unit 3743

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I hereby certify that the following documents in Application No. 10/693,112, filed on October 24, 2003 for ENDOTRACHEAL TUBE are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Document(s) Attached

1. Transmittal 1 pg
2. Amendment (with 6 sheets of replacement drawings) 16 pgs
3. Declaration Pursuant to 37 CFR 1.132 3 pgs

Number of pages being transmitted, including this page: 21 pages

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/693,112
	Filing Date	October 24, 2003
	First Named Inventor	Hipolito, Ronaldo B.
	Art Unit	3743
	Examiner Name	Teena Kay Mitchell
Total Number of Pages in This Submission	Attorney Docket Number	023070-122010US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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